

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)

Nan Hayworth

(b) Address (number and street)

P. O. Box 188

☒ Check if address changed

2. Identification Number

H0NY19139

(c) City, State and ZIP Code

Carmel

NY

10512

3. Is This Statement

☐ New (N)

OR

☒ Amended (A)

4. Party Affiliation

REPUBLICAN PARTY

5. Office Sought

House

6. State &amp; District of Candidate

NY 19

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)

Friends of Nan Hayworth

(b) Address (number and street)

P. O. Box 188

(c) City, State and ZIP Code

Carmel

NY

10512

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

Signature of Candidate

Nan Hayworth

Date

03/01/2011

**NOTE:** Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

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(a) Name of Committee (in full)

NY-19 Congressional Victory Committee

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(b) Address (number and street)

264 N. Lumpkin Street, #202

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(c) City, State and ZIP Code

Athens

30601

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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

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(a) Name of Committee (in full)

New York House Victory Fund

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(b) Address (number and street)

228 S. Washington Street, #115

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(c) City, State and ZIP Code

Alexandria

22314

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